

County: Door  
SCANDIA VILLAGE GOOD SAMARITAN  
290 SMITH DRIVE

Facility ID: 8640

Page 1

SISTER BAY 54234 Phone:(920) 854-2317  
Operated from 1/1 To 12/31 Days of Operation: 365  
Operate in Conjunction with Hospital? No  
Number of Beds Set Up and Staffed (12/31/02): 60  
Total Licensed Bed Capacity (12/31/02): 60  
Number of Residents on 12/31/02: 60

Ownership: Non-Profit Corporation  
Highest Level License: Skilled  
Operate in Conjunction with CBRF? Yes  
Title 18 (Medicare) Certified? Yes  
Title 19 (Medicaid) Certified? Yes  
Average Daily Census: 58

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/02)				Length of Stay (12/31/02)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		43.3
Supp. Home Care-Personal Care	No	-----		-----		1 - 4 Years		35.0
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	0.0	More Than 4 Years		21.7
Day Services	No	Mental Illness (Org./Psy)	61.7	65 - 74	8.3			-----
Respite Care	No	Mental Illness (Other)	0.0	75 - 84	33.3			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	48.3	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	10.0	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	Yes	Fractures	3.3		100.0	(12/31/02)		
Other Meals	No	Cardiovascular	6.7	65 & Over	100.0	-----		
Transportation	No	Cerebrovascular	11.7		-----	RNs		12.4
Referral Service	No	Diabetes	1.7	Sex	%	LPNs		3.3
Other Services	Yes	Respiratory	1.7	-----		Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	13.3	Male	16.7	Aides, & Orderlies		
Mentally Ill	No		-----	Female	83.3			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

			Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care			Total	%
Level of Care			No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Resi- dents	Of All
Int. Skilled Care	0	0.0	0		0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	7	100.0	217		33	89.2	106	0	0	0.0	14	87.5	137	0	0	0.0	0	0	0.0	0	54	90.0
Intermediate	---	---	---		4	10.8	88	0	0	0.0	2	12.5	133	0	0	0.0	0	0	0.0	0	6	10.0
Limited Care	---	---	---		0	0.0	0	0	0	0.0	0	0.0	0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---		0	0.0	0	0	0	0.0	0	0.0	0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---		0	0.0	0	0	0	0.0	0	0.0	0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---		0	0.0	0	0	0	0.0	0	0.0	0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0		0	0.0	0	0	0	0.0	0	0.0	0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0		0	0.0	0	0	0	0.0	0	0.0	0	0	0	0.0	0	0	0.0	0	0	0.0
Total	7	100.0			37	100.0			0	0.0		16	100.0		0	0.0		0	0.0		60	100.0

*****													
Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02											
		-----											
Percent Admissions from:		Activities of		%	% Needing		% Totally		Total				
		Daily Living (ADL)		Independent	Assistance of		Dependent		Number of				
					One Or Two Staff				Residents				
Private Home/No Home Health	9.0	Bathing		0.0	95.0		5.0		60				
Private Home/With Home Health	3.0	Dressing		5.0	93.3		1.7		60				
Other Nursing Homes	16.4	Transferring		21.7	75.0		3.3		60				
Acute Care Hospitals	65.7	Toilet Use		8.3	86.7		5.0		60				
Psych. Hosp.-MR/DD Facilities	0.0	Eating		41.7	53.3		5.0		60				
Rehabilitation Hospitals	0.0	*****											
Other Locations	6.0	Continence		%	Special Treatments				%				
Total Number of Admissions	67	Indwelling Or External Catheter		3.3	Receiving Respiratory Care				5.0				
Percent Discharges To:		Occ/Freq. Incontinent of Bladder		75.0	Receiving Tracheostomy Care				0.0				
Private Home/No Home Health	27.3	Occ/Freq. Incontinent of Bowel		26.7	Receiving Suctioning				0.0				
Private Home/With Home Health	3.0	Mobility			Receiving Ostomy Care				0.0				
Other Nursing Homes	3.0	Physically Restrained		8.3	Receiving Tube Feeding				0.0				
Acute Care Hospitals	9.1				Receiving Mechanically Altered Diets		26.7						
Psych. Hosp.-MR/DD Facilities	0.0	*****											
Rehabilitation Hospitals	0.0	Skin Care			Other Resident Characteristics								
Other Locations	16.7	With Pressure Sores		3.3	Have Advance Directives				93.3				
Deaths	40.9	With Rashes		6.7	Medications								
Total Number of Discharges					Receiving Psychoactive Drugs		53.3						
(Including Deaths)	66												
*****													
Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities													
*****													
		This Facility	Ownership:		Bed Size:		Licensure:		All				
		%	Nonprofit		50-99		Skilled		Facilities				
			Peer Group		Peer Group		Peer Group		Ratio				
			% Ratio		% Ratio		% Ratio		% Ratio				
Occupancy Rate: Average Daily Census/Licensed Beds		96.7	86.5	1.12	83.5	1.16	83.3	1.16	85.1	1.14			
Current Residents from In-County		93.3	79.3	1.18	72.9	1.28	75.8	1.23	76.6	1.22			
Admissions from In-County, Still Residing		38.8	23.9	1.63	22.2	1.75	22.0	1.76	20.3	1.91			
Admissions/Average Daily Census		115.5	107.3	1.08	110.2	1.05	118.1	0.98	133.4	0.87			
Discharges/Average Daily Census		113.8	110.2	1.03	112.5	1.01	120.6	0.94	135.3	0.84			
Discharges To Private Residence/Average Daily Census		34.5	41.6	0.83	44.5	0.77	49.9	0.69	56.6	0.61			
Residents Receiving Skilled Care		90.0	93.2	0.97	93.5	0.96	93.5	0.96	86.3	1.04			
Residents Aged 65 and Older		100	95.7	1.04	93.5	1.07	93.8	1.07	87.7	1.14			
Title 19 (Medicaid) Funded Residents		61.7	69.2	0.89	67.1	0.92	70.5	0.87	67.5	0.91			
Private Pay Funded Residents		26.7	22.6	1.18	21.5	1.24	19.3	1.38	21.0	1.27			
Developmentally Disabled Residents		0.0	0.6	0.00	0.7	0.00	0.7	0.00	7.1	0.00			
Mentally Ill Residents		61.7	35.9	1.72	39.0	1.58	37.7	1.64	33.3	1.85			
General Medical Service Residents		13.3	18.1	0.74	17.6	0.76	18.1	0.74	20.5	0.65			
Impaired ADL (Mean)		44.7	48.7	0.92	46.9	0.95	47.5	0.94	49.3	0.91			
Psychological Problems		53.3	52.0	1.03	54.6	0.98	52.9	1.01	54.0	0.99			
Nursing Care Required (Mean)		5.2	6.8	0.77	6.8	0.77	6.8	0.77	7.2	0.72			